Page 1 of 66 Document

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your		Lauren First name Heather Middle name Keith	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Lauren Weber	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8595	

Desc Main

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	3639 N. Plainfield Ave.	If Debtor 2 lives at a different address:			
		Chicago, IL 60634 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Page 3 of 66 Document Case number (if known) Debtor 1 Lauren Heather Keith Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When Case number District

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

■ No

Yes.

Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Document

Debtor 1 Lauren Heather Keith

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Case number (if known)

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Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure Bankruptcy Code and are you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Debtor 1 Lauren Heather Keith

Document Page 5 of 66 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Lauren Heather K	eith	Docume	Case	number (if known)		
Part	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incur individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		ousiness debts? Business debts are estment or through the operation of			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or	business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	Yes.		Do you estimate that after any exen vailable to distribute to unsecured co	npt property is excluded and administrative expense editors?		
	administrative expenses		■ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	■ 1-49		1 ,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	■ 1-49 □ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
	owe?	□ 100-1		□ 10,001-25,000	☐ More than100,000		
		□ 200-9	99				
19. How much do you		\$ 0 - \$	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 millio			
			001 - \$500,000	□ \$50,000,001 - \$100 millio			
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 mil	lion		
20.	How much do you	\$0 - \$	50.000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 millio			
			001 - \$500,000	□ \$50,000,001 - \$100 millio			
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 mil	ion		
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I de	clare under penalty of perjury that the	ne information provided is true and correct.		
					eligible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.		
				not pay or agree to pay someone wne notice required by 11 U.S.C. § 34	ho is not an attorney to help me fill out this 2(b).		
		I request	relief in accordance with the	chapter of title 11, United States Co	de, specified in this petition.		
		bankrupt and 3571	cy case can result in fines up		noney or property by fraud in connection with a o to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519		
			en Heather Keith Heather Keith		of Debtor 2		
			e of Debtor 1	O.g. activo c			
		Executed	on December 29, 2016	Executed o	n		
			MM / DD / YYYY		MM / DD / YYYY		

Debtor 1 Lauren Heather Keith

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Case number (if known)

For your attorney, if you are

If you are not represented by an attorney, you do not need to file this page.

represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Linda G. Bal	Date	December 29, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
Linda G. Bal		
Printed name		
Linda Bal Law Inc.		
Firm name		
207 N. Walnut Street		
Itasca, IL 60143		
Number, Street, City, State & ZIP Code		
Contact phone 630-285-0255	Email address	LindaBal@att.net
6202830		
Bar number & State		

12/29/16	4:15PM

ebtor 1	Lauren Heather K	Ceith		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba Case number	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
f known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		•
Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,326.36
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,326.36
Par	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	17,467.00
	Your total liabilities	\$	17,467.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	792.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	790.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Debtor 1 Lauren Heather Keith

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Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Desc Main Case 16-40654 Doc 1 Filed 12/29/16 Entered 12/29/16 16:26:21 Document Page 10 of 66 Fill in this information to identify your case and this filing: Debtor 1 **Lauren Heather Keith** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Nitro Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2011 Year: Debtor 2 only Current value of the Current value of the 52000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another Debtor has 50% interest. Other \$3,889.50 \$7,779.00 50% by father, Thomas Keith. ☐ Check if this is community property (see instructions) FMV, per_ is \$7779. No loan 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here......>>

\$3,889.50

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Case number (if known) Debtor 1 **Lauren Heather Keith** 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ Yes. Describe..... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Ordinary household electronics Includes: Smart phone, kindle, laptop computer, printer and \$100.00 accessories 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$75.00 Necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$45.00 Silver ring and costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$220.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

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Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No

☐ Yes. Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

		Case 16-40654	Doc 1	Filed 12/29/16 Document	Entered 12/29 Page 13 of 66	9/16 16:26:21	Desc Main	12/29/16 4:15F
De	ebtor 1	Lauren Heather Ke	ith			ase number (if known)		
25.	Trusts, ■ No	equitable or future inte	erests in prope	erty (other than anythin	g listed in line 1), and	rights or powers exe	rcisable for your	benefit
		Give specific information	about them					
	Examp ■ No	s, copyrights, trademark les: Internet domain nam Give specific information	nes, websites, p			s		
27.	_Examp	es, franchises, and other			n holdings, liquor license	es, professional licens	es	
	■ No □ Yes.	Give specific information	about them					
M	oney or p	property owed to you?					Current valu portion you Do not deduc claims or exe	own? ct secured
28.	□ No	unds owed to you Give specific information	about them, inc	cluding whether you alre	ady filed the returns and	I the tax years		
				6 refund. Held by IRS amounts owed.	to check for any	Federal		\$101.00
	■ No □ Yes. 0 Other a Examp	Give specific information mounts someone owes les: Unpaid wages, disab benefits; unpaid loar Give specific informatior	s you bility insurance ns you made to	payments, disability ben				curity
31.	Examp	ts in insurance policies bles: Health, disability, or		health savings account (HSA); credit, homeowne	er's, or renter's insurar	nce	
	■ No □ Yes. I	Name the insurance com Co	pany of each p mpany name:	olicy and list its value.	Beneficiary	r:	Surrender o value:	r refund
	If you a someon	erest in property that is are the beneficiary of a livenee has died. Give specific information	ving trust, exped			urrently entitled to rece	eive property becau	ıse
	Examp ■ No	against third parties, woles: Accidents, employm	ent disputes, in			or payment		
34.	Other c	contingent and unliquid	ated claims of	every nature, including	g counterclaims of the	debtor and rights to	set off claims	
	☐ Yes.	Describe each claim						
35.	Any fin ■ No	ancial assets you did n	ot already list					

	Case 16-40654		Filed 12/29/16		2/29/16 16:26:21	Desc Main 12/29/16 4:15PM
Debto	Lauren Heather Keith		Document	Page 14 of	Case number (if known)	
	Yes. Give specific information					
36 1	Add the dollar value of all of you	r antrias from	Part 4 including a	ny antrias for nac	ues vou have attached	
	or Part 4. Write that number here					\$216.86
Part 5:	Describe Any Business-Related Pr	roperty You Ow	n or Have an Interest	In. List any real esta	ate in Part 1.	
37. Do	you own or have any legal or equital	ble interest in a	ny business-related p	roperty?		
N	o. Go to Part 6.					
☐ Y	es. Go to line 38.					
Part 6:	Describe Any Farm- and Commerc If you own or have an interest in farm			n or Have an Intere	st In.	
46. Do	you own or have any legal or e	quitable inter	est in any farm- or	commercial fishir	ng-related property?	
	No. Go to Part 7.					
	Yes. Go to line 47.					
Part 7:	Describe All Property You Ov	vn or Have an Ir	nterest in That You Did	d Not List Above		
	you have other property of any xamples: Season tickets, country of					
	No					
	Yes. Give specific information					
54. A	Add the dollar value of all of you	r entries from	Part 7. Write that n	umber here		\$0.00
Part 8:	List the Totals of Each Part of	this Form			·	
55. P	Part 1: Total real estate, line 2					\$0.00
56. P	Part 2: Total vehicles, line 5			\$3,889.50		
57. P	Part 3: Total personal and house	hold items, lir	ne 15	\$220.00		
58. P	Part 4: Total financial assets, line	∍ 36		\$216.86		
59. P	Part 5: Total business-related pro	operty, line 45		\$0.00		
	Part 6: Total farm- and fishing-re		y, line 52	\$0.00		
61. P	Part 7: Total other property not li	sted, line 54	+	\$0.00		
62. T	otal personal property. Add lines	s 56 through 6°	1	\$4,326.36	Copy personal property to	otal \$4,326.36
63. T	otal of all property on Schedule	A/B. Add line	55 + line 62			\$4,326.36

Official Form 106A/B Schedule A/B: Property page 5

Ca	ase 16-40654	Doc 1	Filed 12/29/16 Document	Entered 12/29/16 16:26:2	1 Desc	Main	12/29/16 4:15PM
Fill in this infor	mation to identify you	r case:					
Debtor 1	Lauren Heather	Keith					
	First Name	Mic	Idle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Mic	ldle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTH	IERN DISTRICT OF IL	LINOIS			
Case number (if known)	1000				_	ck if this i	
Official Fo	orm 106C						
Schedul	e C: The Pi	oper	ty You Clai	m as Exempt			4/16
the property you	listed on <i>Schedule A/B</i> . nd attach to this page a	Property (0	Official Form 106A/B) as	ogether, both are equally responsible for sus your source, list the property that you claid <i>Page</i> as necessary. On the top of any add	m as exempt.	If more s	space is
specific dollar a any applicable s funds—may be exemption to a p	mount as exempt. Altestatutory limit. Some e unlimited in dollar am	ernatively, xemptions ount. Howe	you may claim the ful —such as those for h ever, if you claim an e	amount of the exemption you claim. One I fair market value of the property being ealth aids, rights to receive certain bene xemption of 100% of fair market value u is determined to exceed that amount, yo	exempted up efits, and tax-ender a law that	to the a exempt in	nmount of retirement the

Part 1:	Identify the	Property Voi	ı Claim as	Evemnt
ı aıtı.	iucilliy lile	I TOPELLY TO	ı Cıaıııı as	Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2011 Dodge Nitro 52000 miles Debtor has 50% interest. Other 50%	\$3,889.50		\$2,400.00	735 ILCS 5/12-1001(c)
by father, Thomas Keith. FMV, per_ is \$7779. No loan Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2011 Dodge Nitro 52000 miles Debtor has 50% interest. Other 50%	\$3,889.50		\$1,489.50	735 ILCS 5/12-1001(b)
by father, Thomas Keith. FMV, per_ is \$7779. No loan Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Ordinary household electronics	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Includes: Smart phone, kindle, laptop computer, printer and accessories Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit	
Necessary wearing apparel Line from Schedule A/B: 11.1	\$75.00		\$75.00	735 ILCS 5/12-1001(a)
Line from Generalie PVD. 1111			100% of fair market value, up to any applicable statutory limit	

Desc Main Case 16-40654 Doc 1 Filed 12/29/16 Entered 12/29/16 16:26:21 Page 16 of 66 Document Lauren Heather Keith Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Silver ring and costume jewelry 735 ILCS 5/12-1001(b) \$45.00 \$45.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$10.00 \$10.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking - Acct ending in 7299: JP 735 ILCS 5/12-1001(b) \$96.86 \$96.86

> 100% of fair market value, up to any applicable statutory limit

> > 735 ILCS 5/12-1001(b)

\$9.00 \$9.00 Morgan Chase Bank Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Federal: 2016 refund. Held by IRS to 735 ILCS 5/12-1001(b) \$101.00 \$101.00 check for any amounts owed. Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Morgan Chase Bank Line from Schedule A/B: 17.1

No

Yes

Savings - Acct ending in 0150: JP

		DOCUME	eni Paue 17 oro	0	
Fill in this infor	mation to identify your	case:			
Debtor 1	Lauren Heather K	Ceith			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Document Page 18 of 66 Fill in this information to identify your case: Debtor 1 Lauren Heather Keith Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 **Advocate Christ Medical Group** 8595 \$175.00 Last 4 digits of account number Nonpriority Creditor's Name date of service 01/17/2012 4140 SW Hwy, When was the debt incurred? Hometown, IL 60456 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify medical bill D.O.B. 03/19/80

4.2	Advocate Home Care Products Inc.	Last 4 digits of account number	8595	\$320.00
	Nonpriority Creditor's Name 10055 S 76th Ave	When was the debt incurred?	date of service 01/15/2012	
	Bridgeview, IL 60455		data di dai fido di i laiza i z	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical bil	I D.O.B. 03/19/80	
4.3	Advocate Home Care Products Inc.	Last 4 digits of account number	8595	\$262.00
	Nonpriority Creditor's Name 10055 S 76th Ave	When was the debt incurred?	date of service: 12/19/11	
	Bridgeview, IL 60455 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneck all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical bil	I D.O.B. 03/19/80	
4.4	Advocate Home Care Products Inc.	Last 4 digits of account number	8595	\$425.00
	Nonpriority Creditor's Name 10055 S 76th Ave.	When was the debt incurred?	date of service: 11/15/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No		g plans, and other similar debts	
	■ NO	Debis to pension of profit-sharif	g plane, and other ontinal about	

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Debtor 1 Lauren Heather Keith Case number (if know) Advocate Home Care Products Inc. 4.5 Last 4 digits of account number 8595 \$230.00 Nonpriority Creditor's Name 10055 S 76th Ave. When was the debt incurred? date of service: 11/15/11 Bridgeview, IL 60455 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical bill D.O.B. 03/19/80 ☐ Yes 4.6 Advocate Home Care Products Inc. Last 4 digits of account number 1H0X \$320.00 Nonpriority Creditor's Name 10055 S 76th Ave date of service: 06/15/12 When was the debt incurred? Bridgeview, IL 60455 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical bill D.O.B. 03/19/80 Other. Specify 4.7 Advocate Home Care Products Inc. Last 4 digits of account number \$719.00 770X Nonpriority Creditor's Name 10055 S 76th Ave When was the debt incurred? date of service: 5/21/12 Bridgeview, IL 60455 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No medical bill D.O.B. 03/19/80 ☐ Yes Other. Specify

Debtor	1 Lauren Heather Keith		Case number (if know)			
4.8	Angela Intili M.D.	Last 4 digits of account number	J40X	\$258.00		
	Nonpriority Creditor's Name 1415 Essington Rd,	When was the debt incurred?	date of service: 06/19/12			
	Joliet, IL 60435 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify medical bil	D.O.B. 03/19/80			
4.9	Angela Intili M.D.	Last 4 digits of account number	4822	\$147.00		
	Nonpriority Creditor's Name 1415 Essington Rd. Joliet, IL 60435-2873	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.		,			
	■ Debtor 1 only	☐ Contingent	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify Medical bil	<u> </u>			
4.1	Associated Radiologists	Last 4 digits of account number	960X	\$119.00		
	Nonpriority Creditor's Name	_		<u> </u>		
	1890 Silver Cross Blvd New Lenox, IL 60451	When was the debt incurred?	date of service: 7/11/12			
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:			
	Check if this claim is for a community					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify medical bil	D.O.B. 3/19/80			

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AT & T	Last 4 digits of account number 5782	\$136.00
Nonpriority Creditor's Name P.O. Box 5014	When was the debt incurred?	
Carol Stream, IL 60197-5014		=
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utility	-
CAVALRY PORTFOLIO SERV	Last 4 digits of account number 5467	\$334.00
Nonpriority Creditor's Name PO BOX 27288	When was the debt incurred? Opened 9/01/14	
TEMPE, AZ 85285	_	-
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Attorney GE CAPITAL	-
Client Services	Last 4 digits of account number 2351	\$334.00
Nonpriority Creditor's Name	Last 4 digits of account number	
3451 Harry Truman Blvd.	When was the debt incurred?	-
Saint Charles, MO 63301-4047 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the ordinate. Officer all that appry	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify collection JC Penny	

\$567.00	Last 4 digits of account number 8054	Com Ed
	When was the debt incurred?	Ionpriority Creditor's Name P.O. Box 6111
		Carol Stream, IL 60197-6111
	As of the date you file, the claim is: Check all that apply	lumber Street City State Zlp Code
	_	Who incurred the debt? Check one.
	☐ Contingent	Debtor 1 only
	☐ Unliquidated	Debtor 2 only
	☐ Disputed	Debtor 1 and Debtor 2 only
	Type of NONPRIORITY unsecured claim: ☐ Student loans	At least one of the debtors and another
		☐ Check if this claim is for a community lebt
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	s the claim subject to offset?
	☐ Debts to pension or profit-sharing plans, and other similar debts	- ■ No
	■ Other. Specify Utility	Yes
\$1,011.00	Last 4 digits of account number 0092	Convergent Outsourcing
		Ionpriority Creditor's Name
	When was the debt incurred?	PO BOX 9004 Renton, WA 98057-9004
	As of the date you file, the claim is: Check all that apply	lumber Street City State Zlp Code
		Who incurred the debt? Check one.
	☐ Contingent	Debtor 1 only
	☐ Unliquidated	Debtor 2 only
	☐ Disputed	Debtor 1 and Debtor 2 only
	Type of NONPRIORITY unsecured claim:	\square At least one of the debtors and another
	☐ Student loans	☐ Check if this claim is for a community
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	lebt
	□ Debts to pension or profit-sharing plans, and other similar debts	s the claim subject to offset?
		■ No
	Other. Specify collection Com Ed	Yes
\$95.00	Last 4 digits of account number 3901	Credit Collection Services
	When was the debt incurred?	lonpriority Creditor's Name Fwo Wells Avenue Newton, MA 02459
	As of the date you file, the claim is: Check all that apply	lumber Street City State Zlp Code
		Vho incurred the debt? Check one.
	☐ Contingent	Debtor 1 only
	☐ Unliquidated	Debtor 2 only
	☐ Disputed	Debtor 1 and Debtor 2 only
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another
	☐ Student loans	☐ Check if this claim is for a community
	☐ Obligations arising out of a separation agreement or divorce that you did not	lebt
	report as priority claims	s the claim subject to offset?
	☐ Debts to pension or profit-sharing plans, and other similar debts	No
	Collection Agency for Nationwide Insurance	☐ Yes

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CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY BOURBONNAIS, IL 60914 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 4 at least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 8/01/12 As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 8/01/12 As of the date you file, the claim is: Check all that apply When was the debt incurred? Opened 8/01/12 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL Opened 1/01/13 Opened 1/01/13	1,015.00
Nonpriority Creditor's Name 755 ALMAR PKWY BOURBONNAIS, IL 60914 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Pyes CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY When was the debt incurred? Opened 8/01/12 Opened 8/01/12 Opened 8/01/12 Opened 8/01/12 Opened 8/01/12 Opened 8/01/12 As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL Last 4 digits of account number T477 When was the debt incurred? Opened 1/01/13	,
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Dobbigations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL 4.1 9 CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY When was the debt incurred? Opened 1/01/13	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL 1477 When was the debt incurred? Opened 1/01/13	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL Last 4 digits of account number When was the debt incurred? Opened 1/01/13	
Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL Last 4 digits of account number 1477 When was the debt incurred? Opened 1/01/13	
Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY No Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL Last 4 digits of account number Opened 1/01/13	
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No	
debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney ASSOCIATED RADIOLOGISTS OF JOL 1477 Uhen was the debt incurred? Opened 1/01/13	
CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY COllection Attorney ASSOCIATED RADIOLOGISTS OF JOL Last 4 digits of account number When was the debt incurred? Opened 1/01/13	
Other. Specify RADIOLOGISTS OF JOL 4.1 9 CREDITORS COLLECTION B Nonpriority Creditor's Name 755 ALMAR PKWY When was the debt incurred? Opened 1/01/13	
CREDITORS COLLECTION B Last 4 digits of account number Nonpriority Creditor's Name 755 ALMAR PKWY When was the debt incurred? Opened 1/01/13	
755 ALMAR PKWY When was the debt incurred? Opened 1/01/13	\$314.00
Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
Collection Attorney ASSOCIATED Pes Other. Specify RADIOLOGISTS OF JOL	

Entered 12/29/16 16:26:21 Case 16-40654 Doc 1 Filed 12/29/16 Desc Main Document Page 25 of 66 Debtor 1 Lauren Heather Keith Case number (if know) 4.2 **CREDITORS DISCOUNT & A** 4791 \$173.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 415 E MAIN ST Opened 3/01/15 When was the debt incurred? STREATOR, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify Collection Attorney INTILI M.D. ANGELA ☐ Yes 4.2 D & A Services 9111 \$334.00 Last 4 digits of account number Nonpriority Creditor's Name 1400 E. Touhy Ave. Ste. G2 When was the debt incurred? Des Plaines, IL 60018 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection Ge capital/JC Penney ☐ Yes 4.2 DISCOVER FIN SVCS LLC 0696 \$1,129,00 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/01/02 Last Active PO BOX 15316 When was the debt incurred? 6/17/13 **WILMINGTON, DE 19850** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes ☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Credit Card

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4.2 3	ENHANCED RECOVERY CO L	Last 4 digits of account number	2604	\$193.00
	Nonpriority Creditor's Name 8014 BAYBERRY RD JACKSONVILLE, FL 32256	When was the debt incurred?	Opened 3/01/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Collection	Attorney TMOBILE	
4.2 4	Family Dental & Medical Health Ctr.	Last 4 digits of account number	8595	\$1,050.00
	Nonpriority Creditor's Name 3337 N. Harlem Ave. Chicago, IL 60634	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify dental bill		
4.2	First Financial Resources	Last 4 digits of account number	9106	\$1,421.00
	Nonpriority Creditor's Name 209 W. Central St., Suite 107	When was the debt incurred?		
	Natick, MA 01760-3716 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify collection I	BMO Harris Bank	

Debtor	1 Lauren Heather Keith		Case number (if know)			
4.2	Franklin Collections Service Inc.	Last 4 digits of account number	0022	\$113.00		
	Nonpriority Creditor's Name P.O. Box 3910 Tupelo, MS 38803	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	☐ Yes	Other Specify collection	AT&T			
4.2	I C SYSTEM INC	Last 4 digits of account number	7001	\$763.00		
7	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ7 00.00		
	PO BOX 64378 SAINT PAUL, MN 55164	When was the debt incurred?	Opened 10/01/15			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	Пол				
	Debtor 1 only	Contingent				
	Debtor 2 only Debtor 1 and Debtor 2 only	Debtor 2 only Unliquidated				
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Collection	Attorney DIRECTV			
4.2	I C SYSTEM INC	Last 4 digits of account number	2001	\$113.00		
8	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ110.00		
	PO BOX 64378 SAINT PAUL, MN 55164	When was the debt incurred?	Opened 3/01/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	■ Other Specify Collection Attorney AT T UVERSE				

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Debtor	1 Lauren Heather Keith	Case number (if know)	
4.2	Illinois Department of Revenue	Last 4 digits of account number 8595	\$579.00
	Nonpriority Creditor's Name PO BOX 19006 Springfield, IL 62794-9006	When was the debt incurred? TY 2010	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify State Income Tax	
4.3	Law Office of Keith S. Shindler Nonpriority Creditor's Name	Last 4 digits of account number 1004	\$363.00
	1990 E. Algonquin Rd. Schaumburg, IL 60173	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify _collection Illinois State Toll Hwy Authority	
4.3	MCSI INC	Last 4 digits of account number 7103	\$250.00
	Nonpriority Creditor's Name PO BOX 327 PALOS HEIGHTS, IL 60463	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify 01 VILLAGE OF BRIDGEVIEW PT	

Debtor	1 Lauren Heather Keith	Case number (if know)	
4.3	Manieiral Callegians of America	F204	\$050.00
2	Municipal Collections of America Nonpriority Creditor's Name	Last 4 digits of account number 5201	\$250.00
	3348 Ridge Rd.	When was the debt incurred?	
	Lansing, IL 60438-3112		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify collection Village of Orland Park	
4.3 3	NICOR	Last 4 digits of account number 8595	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 190	When was the debt incurred?	
	Aurora, IL 60507		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Utility - Service address: 1315 S. State St., Apt #2, Lockport, II 60441	
4.3	Physicians Coop Community Med.	2420	#2.00
4	Ctr. Nonpriority Creditor's Name	Last 4 digits of account number 2129	\$3.00
	5320 w. 159th St. #400	When was the debt incurred?	
	Oak Forest, IL 60452-3328		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify medical bill	
		— Outon Opeony	

4.3	Presence Health	Last 4 digits of account number 1005	\$7.00
	Nonpriority Creditor's Name 62314 Collections Center Drive Chicago, IL 60693-0623	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	_	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical bill	
4.3	Presence Health	Last 4 digits of account number 5901	\$410.00
	Nonpriority Creditor's Name		
	62314 Collections Center Drive Chicago, IL 60693-0623	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	<u> </u>		
	☐ Yes	Other. Specify medical bill	
4.3	Silver Cross Hospital	Last 4 digits of account number 9807	\$49.00
	Nonpriority Creditor's Name Payment Processing Center	When was the debt incurred?	
	PO BOX 739		
	Moline, IL 61266 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Oneck all that apply	
	Debtor 1 only	☐ Contingent	
		-	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Observations		
	☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did no		
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify medical bill	
	· 	— Juici. Opedity	

Debto	Lauren Heather Keith	Case number (if know)	
4.3	Silver Cross Hospital	Last 4 digits of account number 3561	\$10.00
	Nonpriority Creditor's Name 7008 Solution Center Chicago, IL 60677-7000	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical bill	
4.3	STELLAR RECOVERY INC	Last 4 digits of account number 3078	\$239.00
	Nonpriority Creditor's Name 1327 HWY 2 W KALISPELL, MT 59901	When was the debt incurred? Opened 3/01/12	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collection Attorney COMCAST	
	□ Yes	Other. Specify Contection Attorney Contects	
4.4	T Mobile Nonpriority Creditor's Name	Last 4 digits of account number 7692	\$65.00
	P.O. Box 742596	When was the debt incurred?	
	Cincinnati, OH 45274-2596		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Cell Phone	

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Debtor	1 Lauren Heather Keith		Case number (if know)				
4.4	Von Bu Cradit Com		oene	¢4 420 00			
1	Van Ru Credit Corp.	Last 4 digits of account number	0696	\$1,129.00			
	Nonpriority Creditor's Name 1350 E. Touhy Ave., Ste. 300E Des Plaines, IL 60018-3342	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No		Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify collection	Discover Bank				
4.4	VISION FINANCIAL SERVI	Last 4 digits of account number	8663	\$190.00			
	Nonpriority Creditor's Name 1900 W SEVERS RD LA PORTE, IN 46350	When was the debt incurred?	Opened 9/01/13				
	Number Street City State Zlp Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	☐ Yes	Other. Specify Collection HOSPITAL					
4.4	VISION FINANCIAL SERVI	Last 4 digits of account number	5116	\$150.00			
3	Nonpriority Creditor's Name						
	1900 W SEVERS RD LA PORTE, IN 46350	When was the debt incurred?	Opened 11/01/12				
	Number Street City State Zlp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	_ '					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Collection					

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Debtor	1 Lauren Heather Keith		Case r	number (if know)				
4.4	VISION FINANCIAL SERVI	Last 4 digits of account numl	_{oer} 7740		\$150.00			
	Nonpriority Creditor's Name 1900 W SEVERS RD	When was the debt incurred?	Oper	ned 2/01/13				
LA PORTE, IN 46350 Number Street City State Zlp Code Who incurred the debt? Check one.		As of the date you file, the cla	im is: Check	call that apply				
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim: ☐ Student loans					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a series of the obligations arising out of a series of the obligations.	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sh	aring plans,	and other similar debts				
	☐ Yes	■ Other. Specify HOSPIT	on Attorno AL	ey SILVER CROSS				
4.4 5	Vision Financial Services	Last 4 digits of account numl	_{oer} 9620		\$41.00			
	Nonpriority Creditor's Name PO BOX 1768 La Porte, IN 46352-1768	When was the debt incurred?						
•	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the cla	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a serior tas priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sh	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify collection	n Silver (Cross Hospital				
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed						
is tryii have r	is page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts the d for any debts in Parts 1 or 2, do not fill out	someone else, list the original credito nat you listed in Parts 1 or 2, list the a	or in Parts 1	or 2, then list the collection agency	here. Similarly, if you			
	nd Address	On which entry in Part 1 or Part 2 did	·	_				
	cial Recovery Services, Inc.	Line <u>4.22</u> of (<i>Check one</i>):		Creditors with Priority Unsecured Claim				
	apolis, MN 55438-5908		■ Part 2:	Creditors with Nonpriority Unsecured C	Claims			
		Last 4 digits of account number	0	696				
	nd Address hristensen & Assoc.	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):		original creditor? Creditors with Priority Unsecured Clain	าร			
PO BOX 519			■ Part 2: Creditors with Nonpriority Unsecured Claims					
Sauki	Rapids, MN 56379-0519	Last 4 digits of account number	62	235				
Part 4:	Add the Amounts for Each Type of U	Jnsecured Claim						
	the amounts of certain types of unsecured cl f unsecured claim.		al reporting	purposes only. 28 U.S.C. §159. Add	the amounts for each			
	6a. Domestic support obligatio	ns	6a.	Total Claim \$0.00				
	Fotal aims art 1 6b. Taxes and certain other deb	ots you owe the government	6b.	\$ 0.00				

12/29/16 4:15PM Page 34 of 66 Case number (if know) Document Debtor 1 Lauren Heather Keith Claims for death or personal injury while you were intoxicated 6c. 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 6f. 0.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims

6h.

6j.

0.00

17,467.00

17,467.00

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

6j.

Page 35 of 66 Document Fill in this information to identify your case: Debtor 1 **Lauren Heather Keith** First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the or, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			-
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	
		·		·	·

	Case 10-40034 I	Docume		f 66	12/29/16 4:15PM
Fill in thi	s information to identify your				
Debtor 1	Lauren Heather K	eith			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nur	mber				
(if known)					☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
			B.		
people ar	s are people or entities who a e filing together, both are equa and number the entries in the e and case number (if known)	ally responsible for supp boxes on the left. Attach	lying correct informati the Additional Page to	on. If more space is need	ed, copy the Additional Page,
1. Do	you have any codebtors? (If y	ou are filing a joint case, c	lo not list either spouse	as a codebtor.	
■ No	n				
□ Ye					
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,				tes and territories include
■ No	o. Go to line 3.				
□Y€	es. Did your spouse, former spou	ıse, or legal equivalent live	with you at the time?		
in lin Form	ie 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make s	sure you have listed the ci	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line _	
	Number Street				

State

City

ZIP Code

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Fill in this information to identify your case: Debtor 1 Lauren Heather Keith Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Check if this is: Case number (If known) ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD/ YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. □ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Hair Stylist** Include part-time, seasonal, or **Employer's name** self-employed work. Sports Clips Occupation may include student **Employer's address** 35 S. Northwest Highway or homemaker, if it applies. Park Ridge, IL 60068 How long employed there? 2 years **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse

			_			5 - 1
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	912.00	\$	N/A
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	N/A
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	912.00	\$	N/A

Debt	or 1	Lauren Heather Keith	-	С	ase number (if ki	nown)				
	Cor	py line 4 here	4.		For Debtor 1	2.00		r Debtor n-filing s		
	-		4.		Ψ914	2.00	Ψ_		N/A	
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a			0.00	\$_		N/A	
	5b.	Mandatory contributions for retirement plans	5b		. ———	0.00	\$_		N/A	
	5c.	Voluntary contributions for retirement plans	5c		. —	0.00	\$_		N/A	
	5d.	Required repayments of retirement fund loans	5d			0.00	\$_		N/A	
	5e.	Insurance	5e		. —	0.00	\$_		N/A	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		ː —	0.00	\$_ \$		N/A N/A	
	5y. 5h.	Other deductions. Specify:	5h	,	·	0.00			N/A N/A	
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		· ———		· •_		N/A	
7.			7.	,	120	0.00	Ψ_ \$			
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•		2.00	Φ_		N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	ì.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d	l.	\$ (0.00	\$		N/A	
	8e.	Social Security	8e) .	\$	0.00	\$_		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$_		N/A	
	8g.	Pension or retirement income	8g	,		0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0.00	+ 5 _		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	792.00	+ \$		N/A	= \$	792.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —					' —	
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe				-	Schedule	<i>J.</i> +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$Combine	792.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						monthly	
	_	Yes, Explain:								

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Fill in this information to identify your case: Debtor 1 Check if this is: **Lauren Heather Keith** ☐ An amended filing Debtor 2 A supplement showing postpetition chapter 13 expenses as of the following date: (Spouse, if filing) MM / DD / YYYY United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS (If known) Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? ☐ No Dependent's relationship to Do not list Debtor 1 and Fill out this information for Dependent's Does dependent Yes. live with you? Debtor 1 or Debtor 2 Debtor 2. each dependent..... age ☐ No Do not state the **Daughter** 3.5 dependents names. Yes ☐ No ☐ Yes ☐ No ☐ Yes □ No ☐ Yes Do your expenses include No expenses of people other than ☐ Yes yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income Your expenses (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage 0.00 payments and any rent for the ground or lot.

If no	t included in line 4:		
4a.	Real estate taxes	4a.	\$ 0.00
4b.	Property, homeowner's, or renter's insurance	4b.	\$ 0.00
4c.	Home maintenance, repair, and upkeep expenses	4c.	\$ 0.00
4d.	Homeowner's association or condominium dues	4d.	\$ 0.00
Add	itional mortgage payments for your residence, such as home equity loans	5.	\$ 0.00

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Deb	tor 1	Lauren F	leather Keith	Case	e num	ber (if known)	
6.	Utiliti	ies:					
-	6a.		heat, natural gas		6a.	\$	0.00
	6b.	Water, sev	ver, garbage collection		6b.	\$	0.00
	6c.		, cell phone, Internet, satellite, and cable	services	6c.	\$	0.00
	6d.	Other. Spe	ecify:		6d.	\$	0.00
7.	Food	and house	ekeeping supplies		7.	\$	415.00
8.			hildren's education costs		8.	\$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning		9.	\$	50.00
10.		•	roducts and services		10.	\$	25.00
		•	ntal expenses		11.	·	0.00
			Include gas, maintenance, bus or train fa	are.		·	
	Do no	ot include ca	ar payments.		12.	\$	150.00
13.			clubs, recreation, newspapers, magaz	ines, and books	13.	\$	50.00
14.	Char	ritable conti	ributions and religious donations		14.	\$	0.00
15.	Insur	rance.	_				
	Do no	ot include in	surance deducted from your pay or inclu	ded in lines 4 or 20.			
	15a.	Life insura	nce		15a.	\$	0.00
	15b.	Health inst	urance		15b.	\$	0.00
		Vehicle ins			15c.	\$	100.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or in	cluded in lines 4 or 20.			
	Spec	•			16.	\$	0.00
17.			ease payments:		47-	c	0.00
			ents for Vehicle 1		17a.	·	0.00
			ents for Vehicle 2		17b.	·	0.00
		Other. Spe			17c.	·	0.00
		Other. Spe			17d.	\$	0.00
18.			of alimony, maintenance, and support		18.	\$	0.00
10			your pay on line 5, <i>Schedule I, Your In</i> s you make to support others who do i		10.	\$	0.00
13.	Spec		you make to support others who do	iot nve with you.	19.	Ψ	0.00
20			erty expenses not included in lines 4 of	r 5 of this form or on Schodulo	_	our Incomo	
20.			on other property		20a.		0.00
		Real estate			20b.	·	0.00
			nomeowner's, or renter's insurance		20c.	·	0.00
			ce, repair, and upkeep expenses		20d.	·	0.00
			er's association or condominium dues		20u. 20e.		0.00
24			ers association of condominatin dues		21.	· -	
۷١.	Othe	er: Specify:			۷١.	+Φ	0.00
22.	Calc	ulate your r	nonthly expenses				
	22a.	Add lines 4	through 21.			\$	790.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any	from Official Form 106J-2		\$	
	22c.	Add line 22a	a and 22b. The result is your monthly ex	penses.		\$	790.00
23.		-	nonthly net income.				
			12 (your combined monthly income) from		23a.	· -	792.00
	23b.	Copy your	monthly expenses from line 22c above.		23b.	-\$	790.00
	00-	Oh.t		:			
	23C.		our monthly expenses from your monthly is your <i>monthly net income</i> .	income.	23c.	\$	2.00
			•				
24.			in increase or decrease in your expen				
			u expect to finish paying for your car loan with terms of your mortgage?	n the year or do you expect your mort	gage p	payment to increas	se or decrease because of a
	■ No		<u>-</u> , o.a				
			Evoloin horo:				
	□ Ye	es.	Explain here:				

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Fill in Abia infor					
	rmation to identify your				
Debtor 1	Lauren Heather K		Lost Name		
Dahtan 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
· You must file th obtaining mone	is form whenever you fi	n connection with a bank	s or amended schedules	s. Making a false statemen	t, concealing property, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ry Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration an	d
X /s/ Lau	uren Heather Keith		X		
	n Heather Keith		Signature of	Debtor 2	
Signatu	ure of Debtor 1				
Date	December 29, 2016		Date		

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Fill	l in this inforn	nation to identify you	ur case:			
	btor 1	Lauren Heather				
		First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS		
	se number _				_	Check if this is an amended filing
	ficial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/10
Be a info nun	as complete a ormation. If m nber (if known	and accurate as poss ore space is needed n). Answer every que	sible. If two married people and the side of two married people is attach a separate sheet to estion.	are filing together, both are this form. On the top of an	equally responsible for su	
			larital Status and Where You	I Lived Before		
1.	What is you	r current marital stat	us?			
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	ı lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you	lived in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3. stat			ever live with a spouse or legalifornia, Idaho, Louisiana, Ne			
	■ No □ Yes. Ma	ake sure you fill out So	chedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Explai	n the Sources of Yo	ur Income			
4.	Fill in the tota	al amount of income y	employment or from operating ou received from all jobs and un have income that you receive	all businesses, including part	-time activities.	endar years?
	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
						,

From January 1 of current year until the date you filed for bankruptcy:

■ Wages, commissions, bonuses, tips

 $\hfill\square$ Operating a business

\$10,255.00 ☐ Wages, commissions,

bonuses, tips

 $\hfill\square$ Operating a business

Official Form 107

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Debtor 1 Lauren Heather Keith

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Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December 3	31, 2015)	■ Wages, commissions, bonuses, tips	\$13,730.00	☐ Wages, commonuted Wages, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$9,926.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	and other winnings. List each	public benefiling from the public benefit in	it payments; ng a joint cas ne gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separal	est; dividends; money collect you received together, list it o	ted from lawsuits; r nly once under De	royalties; and btor 1.	d gambling and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ments You	Made Before You Filed for	Bankruptcy			
6.	Are eithe	r Debtor 1's	or Debtor 2	s debts primarily consume	debts?			
	□ No.			ebtor 2 has primarily consupersonal, family, or househol		are defined in 11	U.S.C. § 101	1(8) as "incurred by an
		During the No.	90 days befo Go to line 7	re you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more	e?	
		☐ Yes	paid that cre	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	its for domestic support oblig			
		* Subject t		on 4/01/19 and every 3 years		or after the date of	adjustment.	
	■ Yes.			r both have primarily consure you filed for bankruptcy, di		of \$600 or more?		
		No.	Go to line 7					
		□ _{Yes}	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.				
	Creditor	's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known) Debtor 1 Lauren Heather Keith

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. Alimony.	artners; relatives of any ger a control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a gener ny managing a	al partner; corporations agent, including one for
	No Yes. List all payments to an insider.					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		, ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Pa	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo ■ No. Go to line 11. □ Yes. Fill in the information below.	w.	erty repossessed, f	foreclosed, garnis	shed, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details. Creditor Name and Address		-	Date	action was	amounts from your Amount
				takeı	1	
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the ben	efit of creditors, a
Pa	tt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

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Document Page 45 of 66 Case number (if known) Debtor 1 Lauren Heather Keith 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Linda Bal Law Inc. **Attorney Fees** 4/13/2016 \$795.00 207 N. Walnut Street Itasca, IL 60143 LindaBal@att.net **Credit Card Management Services Inc** Credit Counseling Class. 11/25/2016 \$24.00 aka DebtHelper.com 4611 Okeechobee Blvd. #114 West Palm Beach, FL 33417

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

 \square Yes. Fill in the details.

Person Who Was Paid Address Description and value of any property transferred

Date payment or transfer was made Amount of payment

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Debtor 1 Lauren Heather Keith

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Nο Yes. Fill in the details. Last balance Name of Financial Institution and Last 4 digits of Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Describe the contents Name of Storage Facility Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Lauren Heather Keith

	toxic substances, wastes, or material into the regulations controlling the cleanup of these		dwater, or other medium, including s	tatutes or
	Site means any location, facility, or property	as defined under any environmental	law, whether you now own, operate,	or utilize it or used
	to own, operate, or utilize it, including dispos		a vicata harardaya aybatanaa tayia	aubatanaa
_	Hazardous material means anything an envir hazardous material, pollutant, contaminant, o		s waste, nazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that	you know about, regardless of when	n they occurred.	
24.	Has any governmental unit notified you that y	you may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	t 11: Give Details About Your Business or C	onnections to Any Business		
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have ar	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	iip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	ırt 12.		
	Yes. Check all that apply above and fill in		S.	
	,	Describe the nature of the business	Employer Identification numbe	r
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.
28.	Within 2 years before you filed for bankruptcinstitutions, creditors, or other parties.	y, did you give a financial statement	to anyone about your business? Incl	ude all financial
	■ No □ Yes. Fill in the details below.			
		Data laguad		

Part 12: Sign Below

Address

(Number, Street, City, State and ZIP Code)

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ La	auren Heather Keitl	
	en Heather Keith ture of Debtor 1	Signature of Debtor 2
Date	December 29, 201	6 Date
Did yo	u attach additional pa	nges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
☐ Yes	3	
Did yo	u pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?
No		
□ Yes	s. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Lauren Heather K	(eith			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if amended	this is an d filing
Official Fo		n for Individu	uals Filing Under	Chapter 7	12/15
Stateme	nt of Intentio	on for Individu		Chapter 7	12/15

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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☐ Retain the property and redeem it.	_
	☐ Yes
	□ Yes
_	
Tetain the property and [explain].	
es ed in Schedule G: Executory Contracts and Une Unexpired leases are leases that are still in effe if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended
	Will the lease be assumed?
	□ No
	☐ Yes
	□ No
	☐ Yes
	□ No
	☐ Yes
	33
	□ No
	☐ Yes
	□ No
	☐ Yes
	□ No
	☐ Yes
	□ No
	☐ Yes
my intention about any property of my estate th	nat secures a debt and any personal
	,,
X	
Signature of Debtor 2	
	ed in Schedule G: Executory Contracts and Une Unexpired leases are leases that are still in effe if the trustee does not assume it. 11 U.S.C. § 36

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:			Liquidation	
	\$24	5	filing fee	_
	\$7	5	administrative fee	
	+ \$1	5	trustee surcharge	
	\$33	5	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

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If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-40654 Doc 1 Filed 12/29/16 Entered 12/29/16 16:26:21 Desc Main Document Page 55 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

	No	orthern District of Illinois	S		
In r	e Lauren Heather Keith	Debtor(s)	Case No Chapter	7	
		Debioi(s)	Chapter		
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be pai	d to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	795.00	
	Prior to the filing of this statement I have received	1	\$	795.00	
	Balance Due		\$	0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are men	nbers and associates of m	y law firm.
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of the agreement.				firm. A
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on here 	atement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex- tions as needed; preparation	n may be required; and any adjourned he emption planning	arings thereof;	ng of
7.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.			ces, relief from stay a	ctions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	r payment to me for	representation of the debt	or(s) in
	December 29, 2016	/s/ Linda G. Bal			
_	Date	Linda G. Bal 620: Signature of Attorna Linda Bal Law In 207 N. Walnut St	ey C.		_

630-285-0255 Fax: 866-285-0754

LindaBal@att.net

Name of law firm

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LINDA G. BAL ATTORNEY AT LAW, MBA Linda Bal Law Inc.

207 North Walnut Street • Itasca, Illinois 60143 630.285.0255 • Fax: 866.300.1077

Email: LindaBal@att.net

Bankruptcy Retainer Agreement

OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE US BANKRUPTCY CODE.

	In con	sideration for services to be rendered to undersigned Client(s),
	Elvla	LAUREN HEATHER KEITH
_	+ <u> + / + / + </u>	LAUREN WEBER WEBER ("Client")
re ba	nam Attorne ankruptcy m	ey, Linda G. Bal, ("Attorney"), in connection with representing Client regarding natters, Client, jointly and severally agrees to the following:
\$ 795	1.	The Flat Fee of \$\frac{795}{\text{Client}}\$ for Legal Fees is required to be paid for representation of Client in Chapter 7 Bankruptcy Case. In the event that Client elects not to proceed with the bankruptcy filing, the Law office of Linda Bal Law
7.65 11 3 O	-	Inc. will retain Three hundred dollars (\$300.00) of the initial retainer fee for administrative expenses plus earned fees, including legal fees billed at \$200.00 per hour and paralegal time billed at \$100.00 per hour, and refund any uncarned balance.
AID	2.	An additional \$335.00, payable to Attorney Linda Bal, for the Court Filing Fee of the Bankruptcy Petition.
V	3.	An additional \$50.00 fee, payable to Attorney Linda Bal, for the Tri-Pull Credit
uc		Report, which will be used to assist our office in determining Client's credit card debt and Client's debt in collection. Warvel Thue
/hul	4.	An additional \$38.00 fee, payable to the Credit Counseling Class Company, for two Required Credit Counseling Courses (\$24.00 for first class and \$14.00 for second class – if taken on internet). This fee is to be paid directly to the Credit
1 (2-1	do	Counseling Course Company.

Client understands that Attorney will not do any work on client's file until Legal Fee (line 1), Court Filing Fee (line 2) and Credit Report Fee (line 3) are paid in full.

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Linds Bull Law Inc.
Bankruptcy Retainer Agreement
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- 5. Client understands that the Bankruptcy Petition will be prepared for Client's review and signing within twenty one days (21) days after all the following are submitted to our office: (a) Legal Fee, (b) Court Filing Fee, (c) Credit Report Fee, (d) Client has submitted copies of all required documents and (e) Client has taken the first Bankruptcy Credit Counseling Class.
- 6. Once the Bankruptcy Petition is signed by the Client and filed with the Court, additional bills can be added to the Bankruptcy Petition through an Amendment for a fee of One Hundred Fifty Dollars (\$150.00) per Amendment. This fee must be received prior to filing the Amendment. Amendments can be filed with the Court up until the date of Final Discharge.
- 7. Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a Forty Dollar (\$40.00) NSF check fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash, certified check or money order.
- 8. Attorney reserves the right to withdraw from Client representation at any time, if among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same. If the Client refuses or is unable to do so, the Attorney is required to reveal the fraud to the affected person or tribunal.
- 9. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 10. Client agrees that Attorney may discard Client records within three (3) years of the completion of the Client's bankruptcy case.
- 11. Attorney shall provide Client with the following services:
 - a. Review and analyze Clients financial circumstances based on information provided by Client.

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Linda Dal Lety to a Bankruptcy Retainer Agreement Page 3 of 6

- If possible and to the extent possible, based on the information provided by b., Client, advise Client of the Clients options, including but not limited to bankruptey options.
- Inform Client what information Client needs to provide Attorney in order to ¢. allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
- Advise Client of the appropriate requirements in connection with the filing d. of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing.
- Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will e, include all typical Attorney required participation in such proceeding. Attorney Bal or one of her Associate Attorneys will attend the Meeting with the Trustee, 341 Meeting.
- f. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided.
- 12. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.
- 13. Client acknowledges that he/she must take two Credit Counseling Classes. The Pre-Petition Class must be taken before the Bankruptcy is filed. The Post-Petition Class must be taken after the Bankruptcy is filed and client has been assigned Bankruptcy Case Number. Client acknowledges that their Bankruptcy cannot be finalized unless both Credit Counseling Classes are taken.
- 14. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Clients Bankruptcy case.
- 15. Client acknowledges that only copies of documents are to be submitted to Attorney. No documents submitted to Attorney will be returned to Client.
- 16. Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to the Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability.

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- 17. Client agrees that the following matters are not included within the scope of this Flat Fee Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Clients behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
 - Preparing Reaffirmation Agreements, negotiating the terms of a. reaffirmation agreements proposed by creditors, motions to redeem personal property, and negotiating reaffirmation agreements when Clients income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
 - Removal of bank account freezes. b.
 - Removal of wage garnishments. Ċ.
 - Getting creditors who have been discharged in their Bankruptcy to đ. stop calling.
 - Correcting Credit Reports. e.
 - Obtaining title reports. f.
 - Removal of a pending action in another court. Motion to impose or extend g. the bankruptcy stay.
 - The determination of real estate or tax liens. h.
 - Motions to Discuss Clients bankruptcy case filed by the Trustee, U.S. İ. Trustee, or any creditor.
 - Any Adversary Proceeding filed by the Trustee, U.S. Trustee, or any j. other party on any basis, including, without limitations, proceedings to determine dischargability of debts.
 - Appeals to the BAP, District Court of Court of Appeals. k.
 - Negotiations with Check Systems regarding Client. 1.
 - Mailing fee for clients who do not have email. m.
- 18. Client understands that certain debts cannot be discharged in bankruptcy. Client agrees that Client is still liable to repay any debt not discharged in Clients bankruptcy. Client understands that the debts listed below are common examples of the types of debts that cannot be discharged in bankruptcy. Client further understands that the list of non-dischargeable debts may be expanded by legislation or court decisions and Attorney has no control over the type of debts that may be or become non-dischargeable.
 - Taxes due to the IRS. a.
 - Student loans as defined by statute. b.
 - Debts owed for spousal or child support. C.
 - Debts owed to the spouse, former spouse, or child in a domestic relations d. proceeding.

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- e. Debts arising from a previous bankruptcy wherein discharge of that particular debt was waived.
- f. Debts owed for money, property, services, extension-or-removal, or refinancing of credit, if obtained by false pretenses, or false representations, or actual fraud.
- g. Consumer debts for luxury goods obtained within ninety (90) days of the date of filing of the bankruptcy petition.
- h. Cash advances obtained within seventy (70) days of the date of the filing of the bankruptcy petition.
- i. Debts owed for fraud or defalcation while acting in a fiduciary capacity, or embezzlement or larceny.
- j. Debts owed for fines, penalties, or forfeitures payable to and for the benefit of governmental entity.
- k. Debts owed for death or personal injury arising from the operation of a motor vehicle, boat, or aircraft while intoxicated by drugs or alcohol.
- 19. Client understands that filing bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Clients statements concerning ownership of real property and any liens attached to Clients real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Clients wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients real estate.
- 20. Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Clients case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
- 21. Client acknowledges that Client has read and understands all the terms contains in this Bankruptcy Retainer Agreement and that, whether written, spoken, recorded or transcribed by any other means, no other terms are made part of this Bankruptcy Retainer Agreement. Client is in agreement with the terms of this agreement and has signed on the signature lines below. Client further acknowledges that Client has received a copy of this Bankruptcy Retainer Agreement.
- 22. Client's file will be closed without a refund if case not filed within nine (9) months of opening, due to client's delay in furnishing paperwork or paying the required fees and costs.

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Client Spouse Signature

Client Spouse Printed Name

Attorney at Law

Client Email Address ____

LKEITH 28 @ grail. can

Client Phone Number _____

708-407-3849

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United States Bankruptcy CourtNorthern District of Illinois

		1 (of the H District of Himos		
In re	Lauren Heather Keith		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	37
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	rs is true and	correct to the best of my
Date:	December 29, 2016	/s/ Lauren Heather Keith Lauren Heather Keith Signature of Debtor		

Advocate Christ Medical Group 4140 SW Hwy, Hometown, IL 60456

Advocate Home Care Products Inc. 10055 S 76th Ave Bridgeview, IL 60455

Advocate Home Care Products Inc. 10055 S 76th Ave. Bridgeview, IL 60455

Angela Intili M.D. 1415 Essington Rd, Joliet, IL 60435

Angela Intili M.D. 1415 Essington Rd. Joliet, IL 60435-2873

Associated Radiologists 1890 Silver Cross Blvd New Lenox, IL 60451

AT & T P.O. Box 5014 Carol Stream, IL 60197-5014

CAVALRY PORTFOLIO SERV PO BOX 27288 TEMPE, AZ 85285

Client Services 3451 Harry Truman Blvd. Saint Charles, MO 63301-4047

Com Ed P.O. Box 6111 Carol Stream, IL 60197-6111

Convergent Outsourcing PO BOX 9004 Renton, WA 98057-9004

Credit Collection Services Two Wells Avenue Newton, MA 02459

CREDITORS COLLECTION B 755 ALMAR PKWY BOURBONNAIS, IL 60914

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL 61364

D & A Services 1400 E. Touhy Ave. Ste. G2 Des Plaines, IL 60018

DISCOVER FIN SVCS LLC PO BOX 15316 WILMINGTON, DE 19850

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL 32256

Family Dental & Medical Health Ctr. $3337 \, \text{N.}$ Harlem Ave. Chicago, IL 60634

Financial Recovery Services, Inc. P.O. Box 385908 Minneapolis, MN 55438-5908

First Financial Resources 209 W. Central St., Suite 107 Natick, MA 01760-3716

Franklin Collections Service Inc. P.O. Box 3910 Tupelo, MS 38803

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN 55164 Illinois Department of Revenue PO BOX 19006 Springfield, IL 62794-9006

J.C. Christensen & Assoc. PO BOX 519
Sauk Rapids, MN 56379-0519

Law Office of Keith S. Shindler 1990 E. Algonquin Rd. Schaumburg, IL 60173

MCSI INC PO BOX 327 PALOS HEIGHTS, IL 60463

Municipal Collections of America 3348 Ridge Rd. Lansing, IL 60438-3112

NICOR Attn: Bankruptcy Dept PO Box 190 Aurora, IL 60507

Physicians Coop Community Med. Ctr. 5320 w. 159th St. #400 Oak Forest, IL 60452-3328

Presence Health 62314 Collections Center Drive Chicago, IL 60693-0623

Silver Cross Hospital Payment Processing Center PO BOX 739 Moline, IL 61266

Silver Cross Hospital 7008 Solution Center Chicago, IL 60677-7000

STELLAR RECOVERY INC 1327 HWY 2 W KALISPELL, MT 59901 T Mobile P.O. Box 742596 Cincinnati, OH 45274-2596

Van Ru Credit Corp. 1350 E. Touhy Ave., Ste. 300E Des Plaines, IL 60018-3342

VISION FINANCIAL SERVI 1900 W SEVERS RD LA PORTE, IN 46350

Vision Financial Services PO BOX 1768 La Porte, IN 46352-1768